## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 020.0343.US.CON

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

## TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, Gust H. Bardy, entitled System And Method For Providing Feedback To An Individual Patient For Automated Remote Patient Care, for a(n):

( ) Origi	nal Patent App	olication.			
	Of U.S. Pa of U.S. Pa of U.S. Pa U.S. Pater	pplication No: 10/251,47 atent No. 6,478,737, issue atent No. 6,331,160, issue	1 ( ) Continuation ( ) Continuation ( ) Continuation ( ) ( ) ( ) ( ) Continuation ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	ontinuation s a continuation continuation of	11111111111111111111111111111111111111
(2			er 35 USC § 120 has been a	added to the specification	n.
Enclosed as	·e·				
() () () () () ()	X) Oath or D (X) A Nev (X) S ( ) A Cop ( ) In o a ( ) S X) Formal D O Associate O Prelimina X) A Duplica X) Fee Trans	why Executed Combined bigned. (by from a Prior Application corporation by Reference at the or declaration is supplication and is hereby bigned Statement Deleting rawing Transmittal Letter Power of Attorney. The Amendment of this Form for mittal Sheet claims small entity status.	Declaration and Power of A  ) Unsigned. on for Continuation/Division ce. The entire disclosure of the oblied, is considered as being incorporated herein by refer incorporated herein by refer incorporated herein by Return (X) Return (X) A Check (X) Information Processing Fee Against D	( ) Partially Signed onal (37 CFR § 1.63(d) f the prior application, f g part of the disclosure erence. Prior Application. (37 Receipt Postcard. k Payment of \$ 804.00 ation Disclosure Statement	.  from which a copy of the of the accompanying  CFR § 163(d)(2)).
`			CLAIMS AS FILED		
	FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Cla		23	3	\$18.00	\$ 54.00
Independent Claims		3	0	\$84.00	\$ 0.00
Multiple	Dependent Cla	aims (if applicable)			\$0.00

CLAIMS AS FILED							
FOR	FOR NO. FILED NO. EXTRA RATE						
Total Claims	23	3	\$18.00	\$ 54.00			
Independent Claims	\$84.00	\$ 0.00					
Multiple Dependent Cla	\$0.00						
Assignment Recording	\$0.00						
Basic Filing Fee	\$750.00						
			Total Filing Fee	\$ 804.00			

to Deposit Account 501144 pursuant to 37 CFR § 1.25. At any time during the pendency of this application, please charge any fees required or credit any overpayment to this Deposit Account.

Respectfully sub

By: Esq., Afterney of Record

Date: August 22, 2003

Correspondence Address:

Law Offices of Patrick J.S. Inouye 810 Third Avenue Suite 258 Seattle, WA 98104

Phone: (206) 381-3900 (206) 381-3999 Fax:

I hereby certify that this is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below and is addressed to:

> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Typed Name: Larissa V. Pigott

Express Mail Label No.: EV317784478US

Date of Deposit: August 22, 2003



U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

		Complete if Known							
I FEE TRANSMITTA	L	Appli	Application Number		Unassigned				
		Filing	Filing Date		August 22, 2003				
for FY 2003	First Named Inventor			Inventor	Bardy				
Effective 01/01/2003. Patent fees are subject to annual revision.		Examiner Name			Unassigned	Unassigned			
Applicant Claims small entity status. See 37 CFR		Art Unit			Unassigned	Unassigned			
TOTAL AMOUNT OF PAYMENT (\$) 804	1.21				020 0343 US CON	020.0343.US.CON			
TOTAL AMOUNT OF PAINLENT		1			320.00 10.00 10.10				
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)							
X Check Credit card Money Other None									
Deposit Account	Fee	Fntity Fee	Fee	Fee (C)	. Fee	Paid			
Deposit Account 501144	Code 1051	( <b>s</b> )	2051	( <b>s</b> ) 65	Fee Description Surcharge – late filing fee or oath				
Number									
Deposit Account Law Offices of Patrick J.S. Inouye	1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet				
Name	1053	130	1053	130	Non-English specification				
The Commissioner is authorized to: (check all that apply)  Charge fee(s) indicated below  X Credit any overpayments	1812	2.520	1812	2.520	For filing a request for ex parte reexamination				
X Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action				
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
to the above-identified deposit account.  FEE CALCULATION	1,054	440	0054						
	1251	110	2251	55	Extension for reply within first month				
BASIC FILING FEE Large Entity   Small Entity	1252 1253	410 930	2252 2253	205 465	Extension for reply within second month  Extension for reply within third month				
Fee Fee Fee Fee Description	1254	1,450	2254	725	Extension for reply within fourth month				
Code         (\$)         Code         (\$)         Fee Paid           1001         750         2001         375         Utility filing fee         750	1255	1,970	2255	985	Extension for reply within fifth month				
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal				
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	$\neg \uparrow$			
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing				
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding				
	1452	110	2452	55	Petition to revive – unavoidable				
SUBTOTAL (1) (\$) 750	1453 1501	1,300 1,300	2453 2501	650 650	Petition to revive – unintentional Utility issue fee (or reissue)				

	SUBTOTAL (2) (\$) 54	Other fee (specify)			
or number prev	iously paid, if greater; For Reissues, see above	*Reduced by Basic Filin	*Reduced by Basic Filing Fee Paid SUB		(\$)
SUBMITTED BY				Complete (	if applicable)
Name (Print/Type)	Patrick J.S. Bouye, Esq.	Registration No. (Attorney/Agent)	40297	Telephone	(206) 381-3900
Signatura	1.4 1/16/			Date	August 22, 2003

Fee Paid

 Design issue fee

Plant issue fee

(37 CFR § 1.129(a))

Petitions to the Commissioner

Processing fee under 37 CFR 1.17(q)

Recording each patent assignment per

property (times number of properties) Filing a submission after final rejection

For each additional invention to be

Request for expedited examination of a design application

Request for Continued Examination (RCE)

examined (37 CFR § 1.129(b))

Submission of Information Disclosure Stmt

Fee from

Independent claims in excess of 3

Multiple dependent claim, if not paid

Reissue claims in excess of 20

\*\*Reissue independent claims over original patent

and over original patent

Extra Claims

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Х

Fee Description

Claims in excess of 20

Total Claims

Independent Claims

Large Entity

Code

Multiple Dependent

(\$)

-20\*\*=

**Small Entity** 

Code **(\$)** 

WARKING: Instrination on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.77 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, Alexandria, VA 2213-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

Commissioner for Patents, Mail Stop Patent Application, PO Box 1450, Alexandria, VA 2213-1450.

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE Applicant(s): Bardy

Application No.: Unassigned

Filed: August 22, 2003

Title: System And Method For Providing

Feedback To An Individual Patient For Automated Remote Patient Care Examiner: Unassigned

Group Art Unit: Unassigned

Attorney Docket No.: 020.0343.US.CON

Assistant Commissioner for Patents Alexandria, VA 22313-1450

## DRAWING TRANSMITTAL LETTER

Sir:

Enclosed herewith please find:

( )	sheets	of	redlined	drawing(s)	which	indicate	proposed	changes	to	the
	drawing be subn	- : .	. •	pproval of th	ese prop	osed char	nges, forma	al drawing	g(s)	will
	oc suom	11111	Ju.							

( ) \_\_\_\_ sheets of corrected formal drawing(s), as required by the Notice of Patent Drawings Objection (PTO-948) which accompanied the Office Action dated

( ) \_\_\_\_ sheets of corrected formal drawing(s), as required by the Notice of Patent Drawing(s) Objection (PTO-948) and approved in the Notice of Allowability dated

sheets of formal drawings, submitted with the enclosed continuation Utility Patent Application.

Examiner's approval of the entry of these drawings is respectfully requested.

Respectfully Submitted,

PATENT TRADEMARK OFFICE

Attorney/Agent for Applicant(s) Reg. No. 40297

Date: August 22, 2003

Telephone No.: (206) 381-3900